

## Message Text

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PAGE 01 VIENNA 07575 301429Z

43

ACTION SCSE-00

INFO OCT-01 PASS-00 ISO-00 SSO-00 /001 W

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O 301354Z AUG 74

FM AMEMBASSY VIENNA

TO SECSTATE WASHDC IMMEDIATE 3627

UNCLAS VIENNA 7575

FOR MRS. JOHN PORTO  
SPORT HILL ROAD  
EASTON, CONNECTICUT 06425

E.O. 11652: N/A

TAGS: CDES AU (MOORE, WALTER)

SUBJECT: DEATH OF AMERICAN CITIZEN

I DEEPLY REGRET TO HAVE TO INFORM YOU THAT THE HOSPITAL IN INNSBRUCK HAS INFORMED US THAT YOUR UNCLE, MR. WALTER MOORE, DIED THE EVENING OF AUGUST 29, OF AN EMBOLISM OF THE LUNGS DUE TO FORMER ACCIDENT. AS LOCAL AUTHORITIES REQUIRE DISPOSITION WITHIN 72 HOURS TIME OF DEATH, FOLLOWING ESTIMATES ARE PROVIDED FOR YOUR INFORMATION AND PLANNING. ESTIMATED COST BURIAL INNSBRUCK, AUSTRIA DOLLARS 250; PREPARATION AND RETURN TO CONNECTICUT BY AIR DOLLARS 2050; CREMATION AND AIR SHIPMENT TO U.S. DOLLARS 440. PLEASE TELEGRAPH INSTRUCTIONS PROMPTLY TO AMERICAN EMBASSY, VIENNA AUSTRIA. INCLUDE NAME DECEASED YOUR REPLY. STATE WHETHER REQUIRED FUNDS ARE BEING TELEGRAPHED. INCLUDE NAME AND ADDRESS OF FUNERAL HOME IN U.S. IF SHIPMENT DESIRED. SEPARATELY TELEGRAPH FUNDS THROUGH BANK OF AMERICA NEW YORK TO BANK OF AMERICA VIENNA. MAKE FUNDS PAYABLE TO AMERICAN EMBASSY VIENNA FOR CASE OF WALTER MOORE. UPON RECEIPT REQUIRED FUNDS YOUR INSTRUCTIONS WILL BE CARRIED OUT AS PROMPTLY AS CIRCUMSTANCES PERMIT. ESTIMATE MINIMUM FIVE DAYS REQUIRED FOLLOWING RECEIPT OF FUNDS TO COMPLETE LOCAL ARRANGEMENTS. AS SOON AS AVAILBLE, SHIPMENT DATA WILL BE TELEGRAPHED TO FUNERAL HOME YOU SELECT. UPON COMPLETION ALL FORMALITIES, COPY OF REPORT OF DEATH TO BE PREPARED

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PAGE 02 VIENNA 07575 301429Z

BY AMERICAN CONSUL SALZBURG WILL BE SENT TO YOU. PLEASE

ACCEPT OUT SYMPATHY IN YOUR BEREAVEMENT.

AMERICAN EMBASSY  
VIENNA, AUSTRIA. MOWINCKEL

NOTE BY OC/T: PASSED EASTON, CONNECTICUT.

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## Message Attributes

**Automatic Decaptioning:** X  
**Capture Date:** 01 JAN 1994  
**Channel Indicators:** n/a  
**Current Classification:** UNCLASSIFIED  
**Concepts:** n/a  
**Control Number:** n/a  
**Copy:** SINGLE  
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**Decaption Date:** 01 JAN 1960  
**Decaption Note:**  
**Disposition Action:** n/a  
**Disposition Approved on Date:**  
**Disposition Authority:** n/a  
**Disposition Case Number:** n/a  
**Disposition Comment:**  
**Disposition Date:** 01 JAN 1960  
**Disposition Event:**  
**Disposition History:** n/a  
**Disposition Reason:**  
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**Document Number:** 1974VIENNA07575  
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**Drafter:** n/a  
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**Executive Order:** N/A  
**Errors:** N/A  
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**Review Date:** 15 MAR 2002  
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**Review Transfer Date:**  
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**Secure:** OPEN  
**Status:** NATIVE  
**Subject:** DEATH OF AMERICAN CITIZEN I DEEPLY REGRET TO HAVE TO INFORM YOU THAT THE HOSPITAL IN  
**TAGS:** CDES, AU, (MOORE, WALTER)  
**To:** STATE  
**Type:** TE  
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